

Hi Everyone,

Things have been a little stressful at the State office over the past couple of weeks, so Dana organized a pumpkin carving event at our 10:00 break today. I've attached some pictures to share. Dana—thanks for reminding us that a daily portion of laughter can be an important part of well balanced lifestyle.

*Laughter is a pleasant sound, it spreads joy all around
Whether you're young or old, laughter can be like
Magic to our souls, whenever we're feeling sad
Laughter can sustain us so that things don't seem
Quite so bad, if we give into laughter, it can be like
A cure for something that seems impossible to endure
So any time your spirits need a lift fill yourself
With laughter and you will find, a much happier
Person with a peaceful frame of mind* **Bonnie Ruth Shaulis**

Have a great weekend.
Kathleen

1. USDA Survey---Please complete by November 9th the attached survey about topics that you would like to see featured in the VENA webinars FNS is planning for FY 2013. If you completed a survey about this while attending the NWA Nutrition and Breastfeeding conference, please do not complete the survey again.
<http://www.surveymonkey.com/s/YSQRBT7>
2. **Food Recall: Kellogg Mini-Wheats Recalled For Possible Presence of Metal Fragments**
Juneau, AK. – Kellogg has issued a recall for several different sized packages of Frosted Mini-Wheats Bite Size Original and Mini-Wheats Unfrosted Bite Size because they may contain fragments of flexible metal mesh from a faulty manufacturing part.
The affected products have the letters “KB”, “AP” or “FK” before or after the “Best If Used Before” date.
3. LA Memo 13-NEW WIC Food List guidance—see attached.

Nice to Know:

1. Ellyn Satter Training -- see below
2. **After diabetes during pregnancy, healthy diet linked to reduced type 2 diabetes risk —see below**

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The Ellyn Satter Institute and the Santa Clara County Department of Public Health Present:

A No-cost Webinar

By feeding authorities Carol Danaher, MPH, RD
and Ellyn Satter, MS RD LCSW BCD

A County-wide Obesity Prevention Strategy: Speaking with One Voice

Mark your calendars and join us for this important presentation
Thursday, October 18, 2012 1:00 PM - 2:00 PM Central

The Ellyn Satter Institute and the Santa Clara County Department of Public Health are pleased to present: *A county-wide obesity prevention strategy: Speaking with one voice*. Behavior change is facilitated when adults hear a consistent message from numerous sources, in various formats. Santa Clara County, CA Public Health Department's Childhood Feeding Collaborative used this principle to coordinate Satter's Division of Responsibility-based child feeding guidance across multiple systems serving families with young children.

This webinar, led by Carol Danaher, MPH, RD with Ellyn Satter, MS RD LCSW BCD, tells how the Childhood Feeding Collaborative advanced the goal of county-wide consistency of message by creating partnerships, training opportunities and support for pediatric healthcare providers, public health program providers, community-based health educators, and child care providers. Learn the steps to success, the challenges and barriers. Program evaluation outcomes for parents and pediatricians will be shared.

This is a free webinar but spots fill up fast! Register today at:
<https://www2.gotomeeting.com/register/883178106>

Questions? Email Katie: katie@ellynsatterinstitute.org

Have you seen our new website? www.ellynsatterinstitute.org

Check out our previous webinars on *Raising Children with Special Needs to be*

Competent Eaters and Preventing Child Overweight and Obesity: Raising Children to be Competent Eaters.

About the Presenters:

Carol Danaher, MPH, RD, co-founded and leads the Childhood Feeding Collaborative of the Santa Clara County Public Health Department. She has designed and administered nutrition programs for nonprofit childcare programs, including Early Head Start. Carol served for 5 years as Child Health and Disability Prevention Program Nutritionist in Santa Clara County where she worked closely with pediatricians. Carol has worked for the Food and Nutrition Service of USDA evaluating child nutrition programs. Volunteer work in Jakarta, Indonesia led to her interest in Public Health.

Ellyn Satter, MS RD LCSW BCD, is a therapist, author and lecturer. She is a registered dietitian and a holder of the Diplomat in Clinical Social Work. Her best-selling books including: *Child of Mine: Feeding With Love and Good Sense* and *Your Child's Weight: Helping without Harming* as well as journal and magazine articles, teaching materials, seminars, and media interviews have made her well known as an authority on nutrition and feeding.

After diabetes during pregnancy, healthy diet linked to reduced type 2 diabetes risk

NIH-supported study first to show reduced risk solely through dietary modification

By sticking to a healthy diet in the years after pregnancy, women who develop diabetes during pregnancy can greatly reduce their risk of developing type 2 diabetes, a study supported by the National Institutes of Health has found.

Previously, it was not known how much the risk for type 2 diabetes in these women could be lowered through adhering to healthy diet.

In about 5 percent of U.S. pregnancies, women who do not have diabetes before becoming pregnant develop high blood sugar levels in pregnancy. This condition, called [gestational diabetes](#), raises a woman's risk of developing type 2 diabetes later in life up to sevenfold, compared to pregnant women who don't have gestational diabetes. Little is known about the role healthy lifestyle factors may have in preventing progression from gestational diabetes to type 2 diabetes later in life.

The study found the greatest reductions in type 2 diabetes risk were for women who followed diets rich in whole grains, fresh fruits, vegetables, and legumes, and included poultry, seafood, and nuts, with limiting intake of red and processed meats. Those who followed this type of diet in the years after having gestational diabetes consistently reduced their risk by about half that of women who did not.

"Our findings indicate that women with gestational diabetes aren't necessarily preordained to develop type 2 diabetes," said senior author Cuilin Zhang, M.D., Ph.D., of the Epidemiology Branch at the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), the NIH institute where much of the analysis was conducted. "It appears they may have some degree of control. Sticking to a healthy diet may greatly reduce their chances for developing diabetes later in life."

In addition to Dr. Zhang's role in the study, funding support was provided by the NIH's National Institute of Diabetes and Digestive and Kidney Diseases (grants DK058845 and P30 DK046200-18) and the National Cancer Institute (grant CA58305).

Dr. Zhang led the multidisciplinary team that conducted the study, including the first author Deirdre K. Tobias, Sc.D., and colleagues Frank B. Hu, M.D., Ph.D., Jorge Chavarro, M.D., Sc.D., Bernard Rosner, Ph.D., and Dariush Mozaffarian, M.D., D.P.H., of the Harvard School of Public Health, Boston. Drs. Hu, Chavarro, Rosner and Mozaffarian are also affiliated with the Brigham and Women's Hospital and Harvard Medical School.

The study appears online in the Archives of Internal Medicine.

The body uses insulin, produced in the pancreas, to move the sugar glucose from the blood and into the cells. In people with [type 2 diabetes](#), cells do not respond appropriately to insulin, and, if untreated, blood sugar reaches high levels. Complications of diabetes include heart disease, stroke, kidney disease, blindness and amputation.

Research has shown that, among the general population, healthy eating can reduce the risk of developing type 2 diabetes. Dr. Zhang and her colleagues have [shown previously](#) that, before they conceive, women who follow a diet low in cholesterol and animal fat, low in sugar sweetened beverages, but high in fiber, and who are physically active have a reduced risk of gestational diabetes.

This study included 4,413 women who developed gestational diabetes between 1991 and 2001. The women were taking part in a long-term study of nurses called the Nurses' Health Study II. As part of the ongoing study, the nurses filled out questionnaires every other year on lifestyle and health. They completed a questionnaire every four years about their intake of several common food items during the previous year.

The researchers ranked the women's responses in terms of how closely they adhered to three widely studied diets: a [Mediterranean](#)-style diet, the Dietary Approaches to Stop Hypertension — or [DASH](#) — diet and the [Healthy Eating Index](#), a measure of how closely an individual follows the healthy eating guidelines developed by the United States Department of Agriculture. All three diets promote eating fruits, vegetables, nuts, legumes and whole grains.

Of the women in the study, 491 later developed type 2 diabetes. The researchers found that women who adhered most closely to these diets (scores in the top 25 percent) lowered their risk for type 2 diabetes considerably when compared to the least compliant group (lowest 25 percent) :

Mediterranean Diet (40 percent lower risk)

Dash Diet (46 percent lower risk)

Healthy Eating Index pattern (57 percent lower risk)

On average, these women developed type 2 diabetes about 14 years after they had experienced gestational diabetes.

"Our findings suggest that reaching out to women who have had gestational diabetes on the importance of a healthy diet might significantly reduce the overall rate of type 2 diabetes," Dr. Tobias said.

Some women in the study who adhered to a healthy diet still developed type 2 diabetes. Dr. Zhang said her team is evaluating other factors, such as genes and physical activity levels and the interaction between genes and diet and lifestyle factors, that might affect a woman's diabetes risk as well, in a large ongoing study on U.S. and Danish women (Diabetes & Women's Health Study) supported by the NICHD.

Source: <http://www.nih.gov/>

Health equity exists when everyone has a fair opportunity to live a healthy life. It is achieved through addressing the conditions in which people are born, grow, live, work and age.

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